



Application for a Mobile Food Truck

Before completing the following application, please carefully review the “Food Truck Policy” document, which includes important details about the licensing requirements.

Date: _____ Applicant (company name): _____

D/B/A (e.g. if food truck name is different from company name): _____

Primary Contact Name: _____ Primary Contact Cell Phone: _____

Primary Contact Business Phone: _____ Primary Contact Email: _____

Name(s) of Owner(s), Partner(s), or Corporate President: _____

Mailing Address of Company: _____

Address of Vehicle Garaging (if different from above): _____

Address of Commissary (if different from above): _____

Truck License Plate State & Number: _____

Make/Model of vehicle: _____

Proposed Location(s) /Day(s)/Hour(s) of Operation: Location description shall include address and physical description. Provide a separate site plan and photo(s) for each location(s). See Appendix II of policy for list of locations presently approved for food trucks.

1. _____

FROM _____ TO _____ (MON, TUE, WED, THU, FRI)

2. _____

FROM _____ TO _____ (MON, TUE, WED, THU, FRI)

3. _____

FROM _____ TO _____ (MON, TUE, WED, THU, FRI)

Calendar Year: 2014

Required Documents (Attach to this application):

- | | |
|--|---|
| ____ Completed application | ____ Copy of MA Department of Motor Vehicles (DMV) Vehicle Registration |
| ____ Insurance Certificate/Worker's Comp Affidavit | ____ CORI Request Form w/identification
(Must complete at Town Manager's Office, need an ID) |
| ____ Site Plan | ____ Copy of a Menu |
| ____ A color photo of your truck in operation | ____ Copy of State Hawkers and Peddlers License
or Town Solicitor's License |
| ____ Copy of Needham Health Department License | ____ Current MA Business Registration Certificate |
| ____ Copy of Fire Department Permit (propane) | |

APPLICANT UNDERSTANDS AND AGREES TO COMPLY WITH ALL THE CONDITIONS NOTED ON THIS APPLICATION, THE BOARD OF SELECTMEN, POLICE DEPARTMENT, FIRE DEPARTMENT, HEALTH DEPARTMENT, AND OTHER LOCAL, STATE AND FEDERAL LAWS GOVERNING MOBILE FOOD FACILITIES AND ACCESSIBILITY AS THEY MAY APPLY TO THIS PERMIT.

Signature of Applicant / Authorized Representative

Date

Print Name

Pursuant to MGL Ch. 62C, Sec. 49A:

I certify under the penalties of perjury that I, to my best knowledge and belief, have read and am in compliance with the contents of M.G.L. Chapter 62C, Section 49A (on reverse side of this application).

Signature of Applicant (Mandatory)

By Corporate Officer (if applicable)

Either a Social Security Number or Federal ID
Number must be Supplied

Date (required)